

U.S. Department of Justice  
United States Marshals Service

## PROCESS RECEIPT AND RETURN

See Instructions for "Service of Process by the U.S. Marshal"  
on the reverse of this form.

PLAINTIFF ANTHONY LAFauci

COURT CASE NUMBER

04 - 12608 - REK

DEFENDANT MICHAEL J. CUNNINGHAM

TYPE OF PROCESS

CIVIL ACTION 1983

SERVE



NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN

NEW HAMPSHIRE STATE PRISON WARDEN OFFICE

AT

ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)

P.O. BOX 14 CONCORD, NEW HAMPSHIRE 03301

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW:

ANTHONY LAFauci #284473  
OSBORN CORRECTIONAL INSTITUTION  
P.O. BOX 100  
SOMERS, CONNECTICUT 06071

Number of process to be served with this Form - 285

1

Number of parties to be served in this case

26

Check for service on U.S.A.

YES

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available For Service):

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Michael J. Cunningham  
NH States Prison Warden Office  
PO Box 14  
Concord, NH 03301-0014

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item

If YES, enter delivery address below:

3. Service Type

 Certified Mail Registered Insured Mail Express Mail Return Receipt for Merchandise C.O.D.

4. Restricted Delivery? (Extra Fee)

PHONE NUMBER

DATE

6-8-05

I WRITE BELOW THIS LINE

MS Deputy or Clerk

Signature

Date

6/6/05

d as shown in "Remarks", the process described in the address inserted below.

named above (See remarks below)

2. Article Number  
(Transfer from service) 7002 0510 0004 1359 3020  
Date of Service

2. Article Number  
(Transfer from service)7002 0510 0004 1359 3020  
Date of Service

Date of Service

Time

am

pm

Signature of U.S. Marshal or Deputy

Signature of U.S. Marshal

## UNITED STATES DISTRICT COURT

District of

Massachusetts

Anthony Lafauci,  
Plaintiff,V.  
Peter Pepe, Jr., et al.,  
Defendants**SUMMONS IN A CIVIL CASE**

CASE NUMBER: C.A. No. 04-12608-REK

TO: (Name and address of Defendant)

Michael Cunningham

THE NEW HAMPSHIRE STATE PRISON  
P.O. BOX 14  
CONCORD, NEW HAMPSHIRE  
03302 - 0014

**YOU ARE HEREBY SUMMONED** and required to serve upon PLAINTIFF'S ATTORNEY (name and address)

Anthony Lafauci, pro se

OSBORN CORRECTIONAL INSTITUTION  
P.O. BOX 100  
SOMERS, CONNECTICUT  
06071

an answer to the complaint which is herewith served upon you, within twenty (20) days after service of this summons upon you, exclusive of the day of service. If you fail to do so, judgment by default will be taken against you for the relief demanded in the complaint. You must also file your answer with the Clerk of this Court within a reasonable period of time after service.

Sarah A. Thornton

CLERK

(By) DEPUTY CLERK

April 22, 2005

DATE